Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *
SHANNON MICHAEL E
1221 BROADWAY
OAKLAND, CA 946121888

2. Issuer Name and Ticker or Trading Symbol
CLOROX CO/DE/ [ CLX ]

3. Date of Earliest Transaction (MM/DD/YYYY)
3/30/2007

5. Relationship of Reporting Person(s) to Issuer
___ X ___ Director
___ 10% Owner
___ Officer (give title below)
___ Other (specify below)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

<table>
<thead>
<tr>
<th>Title of Security</th>
<th>Trans. Code</th>
<th>Date of Transaction</th>
<th>Amount or Number of Securities Beneficially Owned</th>
<th>Ownership Form</th>
<th>Nature of Indirect Beneficial Ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferred Stock Units</td>
<td>A</td>
<td>3/30/2007</td>
<td>147</td>
<td>Common Stock</td>
<td>147.00</td>
</tr>
</tbody>
</table>

Explanation of Responses:
( 1) 1-for-1
( 2) Receipt of Deferred Stock Units in lieu of portion of quarterly director's fees.
( 3) The Deferred Stock Units will be settled 100% in Clorox stock upon the reporting person's retirement or other termination of service as a Director.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<table>
<thead>
<tr>
<th>Title of Derivative Security</th>
<th>Trans. Code</th>
<th>Date of Transaction</th>
<th>Amount or Number of Shares</th>
<th>Ownership Form</th>
<th>Nature of Indirect Beneficial Ownership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferred Stock Units</td>
<td>A</td>
<td>3/30/2007</td>
<td>147</td>
<td>Common Stock</td>
<td>147.00</td>
</tr>
</tbody>
</table>

Reporting Owners

Reporting Owner Name / Address | Relationships |
-----------------------------|---------------|
SHANNON MICHAEL E | Director |
1221 BROADWAY | 10% Owner |
OAKLAND, CA 946121888 | Officer |

Signatures

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).


Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.